

Message

From: bounce-36382968-62701352@listserv.unc.edu [bounce-36382968-62701352@listserv.unc.edu]
on behalf of Occupational & Environmental Medicine for Clinicians & Public Health Professionals digest [occ-env-med-l@listserv.unc.edu]
Sent: 7/9/2015 4:26:52 AM
To: occ-env-med-l digest recipients [occ-env-med-l@listserv.unc.edu]
Subject: occ-env-med-l digest: July 08, 2015

OCC-ENV-MED-L Digest for Wednesday, July 08, 2015.

1. occupational medicine practice management software
2. =?utf-8?B?Rlc6IFRvZGF5OiAgRVBBL05JRUhTIENoawxkcmVu4oCZcyBDZW50ZXJzIEp1?= =?utf-8?Q?ly_2015_Webinar_(TODAY,_This_Afternoon)?=
3. CDME through telemedicine
4. Re: CDME through telemedicine
5. Re: CDME through telemedicine
6. Re: CDME through telemedicine
7. FW: Feds Find Gaping Holes in Cal/OSHA Safety Net

Subject: occupational medicine practice management software
From: Peter Rousmaniere <pfr@rousmaniere.com>
Date: Wed, 8 Jul 2015 07:54:56 -0400
X-Message-Number: 1

Is anyone aware of a directory or comparative assessment of practice management software designed for occ med clinics?

Peter Rousmaniere
29 Church Hill Rd.
Woodstock VT 05091
802-457-9149 voice
802-291-3843 cell
(802) 234-8055 fax
pfr@rousmaniere.com

professional website:
www.peterrousmaniere.com

weblog:
www.workingimmigrants.com

Subject: =?utf-8?B?Rlc6IFRvZGF5OiAgRVBBL05JRUhTIENoawxkcmVu4oCZcyBDZW50ZXJzIEp1?= =?utf-8?Q?ly_2015_Webinar_(TODAY,_This_Afternoon)?=
From: "Wallace, Tim" <Tim.Wallace@flhealth.gov>
Date: Wed, 8 Jul 2015 13:53:39 +0000
X-Message-Number: 2

Apologies for the cross posting. I believe that Dr. Paulson is a member of this listserv..... So perhaps this may interest others in this group.

Tim Wallace, RS, CEHP
Florida Dept. of Health
Tallahassee, FL, USA

Please note: Florida has a very broad public records law. Most written communications to or from state officials regarding state business are public records available to the public and media upon request. Your e-mail communications may therefore be subject to public disclosure.

From: Partnerships for Environmental Public Health [mailto:PEPH@LIST.NIH.GOV] On Behalf Of O'Fallon, Liam (NIH/NIEHS) [E]
Sent: Wednesday, July 08, 2015 9:17 AM
To: PEPH@LIST.NIH.GOV<mailto:PEPH@LIST.NIH.GOV>
Subject: Today: EPA/NIEHS Children's Centers July 2015 Webinar

PEPH Community,

Perhaps you have already seen this announcement through other lists. If not, and you have time today (1 pm ET), you might want to check out this webinar on children's environmental health!

Panelists are:

James Johnson (EPA)
Linda Birnbaum (NIEHS)
Patrick Breysse (CDC/ATSDR)
Ruth Etzel (EPA)

See below for details.

--Liam

PS - Register today for the virtual forum this Friday!

Near Roadway Pollution & Health --

<http://www.niehs.nih.gov/about/community/communityforums/pollution/index.cfm>

From: ncer_listserver@saic.com<mailto:ncer_listserver@saic.com> [mailto:ncer_listserver@saic.com]

Sent: Tuesday, July 07, 2015 12:54 PM

To: ahricko@hsc.usc.edu<mailto:ahricko@hsc.usc.edu>

Subject: Upcoming Event; EPA/NIEHS Children's Centers July 2015 Webinar

Hi

[<http://epa.gov/ncer/webstickers/flash/2015kids-webinars.jpg>]

EPA/NIEHS Children's Centers July 2015 Webinar

Topic: The Significance of Children's Environmental Health Research Through Collaboration
Wednesday, July 8, 2015, 1:00 p.m. to 2:30 p.m. EDT

To Register: <http://epa.gov/ncer/events/#jul2015>

The EPA/NIEHS Children's Centers Program

For many reasons, children are likely to be more vulnerable than adults to the effects of environmental contaminants. To better understand the effects of these exposures on children's health, the EPA/NIEHS Children's Environmental Health and Disease Prevention Research Centers (Children's Centers) were established in 1998 to explore ways to reduce children's health risks from environmental factors. The webinar series, cosponsored by the EPA Office of Children's Health Protection and the National Center for Environmental Research, features presentations on recent findings and new developments in children's environmental health research, and interactive discussions.

The EPA/NIEHS Children's Centers are part of EPA's Sustainable and Healthy Communities (SHC) Research Program. The SHC Research Program provides useful science and tools for decision makers at all levels to help communities advance sustainability as well as achieve regulatory compliance. SHC is collaborating with partners to conduct research that will result in science-based knowledge to guide decisions at the federal, regional, state and community level that will better sustain a healthy society and environment in America's communities.

Webinar flyer: <http://epa.gov/ncer/childrenscenters/publications/cehc-webinar-savethedate-july0815.pdf>

Featured Speakers:

[<http://epa.gov/ncer/childrenscenters/webinar/johnson.jpg>]James H. Johnson, Ph.D.

Director, U.S. EPA National Center for Environmental Research

Presentation Title: EPA/NIEHS Children's Environmental Health and Disease Prevention Research Centers - Recent Developments and Future Plans

Dr. James H. Johnson, Jr., is the Director of the National Center for Environmental Research (NCER) in the U.S. Environmental Protection Agency's (EPA) Office of Research and Development (ORD). In this role, Dr. Johnson continues a life-long career dedicated to sustaining and advancing scientific research and education initiatives supporting environmental protection, quality-of-life programs and policies, and environmental workforce development. Dr. Johnson has served on numerous committees and boards for the National Academies, EPA and academic institutions. He is a member of the Anne Arundel Community College (MD) Board of Trustees, and is Professor Emeritus of Civil Engineering and Dean Emeritus of the College of Engineering, Architecture and Computer Sciences at Howard University. Dr. Johnson has a B.S. in Civil Engineering from Howard University and an M.S. from the University of Illinois. He earned his Ph.D. in Applied Sciences from the University of Delaware.

[<http://epa.gov/ncer/childrenscenters/webinar/birnbaum.jpg>]Linda Birnbaum, Ph.D.

Director, National Institute of Environmental Health Sciences

Presentation Title: Our Environment, Our Health, Our Children's Future

Linda S. Birnbaum, Ph.D., became the Director of the National Institute of Environmental Health Sciences (NIEHS), one of the National Institutes of Health (NIH), and the National Toxicology Program (NTP) on January 18, 2009. In these roles Birnbaum oversees federal funding for biomedical research to discover

how the environment influences human health and disease. Several advisory boards and councils provide Birnbaum and NIEHS/ NTP staff with input to accomplish this large task.

Birnbaum is the first toxicologist and the first woman to lead the NIEHS/NTP. She has spent most of her career as a federal scientist.

Birnbaum has received numerous awards and recognitions, including being elected to the Institute of Medicine of the National Academies, in October 2010, one of the highest honors in the fields of medicine and health.

[<http://epa.gov/ncер/childrenscenters/webinar/breysse.jpg>]Patrick Breysse, Ph.D.

Director, Center for Disease Control's National Center for Environmental Health and Agency for Toxic Substances and Disease Registry

Presentation Title: CDC/ATSDR's Role in Children's Environmental Health

Pat Breysse, PhD, joined CDC in December 2014 as the Director of NCEH/ATSDR. Dr. Breysse leads CDC's efforts to investigate the relationship between environmental factors and health. He came to CDC from the Johns Hopkins University where he served as Associate Chair for Educational Programs within the Department of Environmental Health Sciences, Program Director for the Industrial Hygiene Training Program, and co-director of the Johns Hopkins Center for Childhood Asthma in the Urban Environment.

During his 30 years at Johns Hopkins, Dr. Breysse established a long-standing expertise in environmental health as well as a strong record as a leader in the field. He has published over 200 peer-reviewed journal articles and has presented at more than 25 scientific meetings in just the past 5 years. His research has focused on the evaluation and control of chemical, biological, and physical factors that can affect health, with a particular concentration on risk and exposure assessment.

Dr. Breysse received his PhD in Environmental Health Engineering from Johns Hopkins University in 1985 and completed postdoctoral training at the British Institute for Occupational Medicine in Edinburgh, Scotland. He is also a board certified Industrial Hygienist and an editorial review board member for the Journal of Exposure Science and Environmental Epidemiology.

[<http://epa.gov/ncер/childrenscenters/webinar/etzel.jpg>]Ruth Etzel M.D., Ph.D.

Director, U.S. EPA Office of Children's Health Protection

Presentation Title: EPA Actions to Reduce Children's Health Risks from Environmental Factors

Dr. Etzel has a broad background in public health, with specific training and expertise in pediatrics, preventive medicine, and children's environmental health. After completing a residency in pediatrics, Dr. Etzel was a Robert Wood Johnson Clinical Scholar at the University of North Carolina at Chapel Hill. During 20 years as a Commissioned Officer in the US Public Health Service, Dr. Etzel served in a variety of public-sector leadership positions including: US CDC (Founding Chief of the Air Pollution and Respiratory Health Branch), US Department of Agriculture (Director of the Division of Epidemiology and Risk Assessment) and US Indian Health Service (Research Director at the Alaska Native Medical Center).

Dr. Etzel is the founding editor of Pediatric Environmental Health (a 3rd edition was published by the American Academy of Pediatrics in 2011). This influential book has helped to train thousands of doctors who care for children about how to recognize, diagnose, treat and prevent illness in children from hazards in the environment. She has worked extensively with international organizations to educate health professionals about environmental health and to build their capacity to conduct environmental investigations. From 2009 to 2012 she served as the Senior Officer for Environmental Health Research in the Department of Public Health and Environment at the World Health Organization in Geneva, Switzerland.

[<http://epa.gov/ncер/childrenscenters/webinar/paulson.jpg>]Jerome Paulson, M.D.

George Washington University
Discussion Moderator

Jerome A. Paulson, MD, FAAP, Director is Professor of Pediatrics at the George Washington University School of Medicine & Health Sciences and Professor of Environmental & Occupational Health at the GW School of Public Health & Health Services. He is the Medical Director for National & Global Affairs of the Children's Health Advocacy Institute at the Children's National Medical Center.

Dr. Paulson serves as chairperson for the American Academy of Pediatrics Council on Environmental Health and serves on the Children's Health Protection Advisory Committee for the US Environmental Protection Agency. In October 2004 he was a Dozor Visiting Professor at Ben Gurion University in Beer Sheva, Israel. He lectured there and throughout Israel on children's environmental health. He was a recipient of a Soros Advocacy Fellowship for Physicians from the Open Society Institute and worked with the Children's Environmental Health Network, and has also served as a special assistant to the director of the National Center on Environmental Health of the CDC working on children's environmental health issues. He is the editor of the October, 2001 and the February and April 2007 editions of Pediatric Clinics of North America on children's environmental health. He has served on numerous boards and committees related to children's environmental health.

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Subject: CDME through telemedicine
From: "Stark, Jane MD MPH" <stark.jane@marshfieldclinic.org>
Date: Wed, 8 Jul 2015 18:28:27 +0000
X-Message-Number: 3

We are noticing an increase in drivers coming from a distance for their exams. We are exploring the possibility of providing these evaluations through our telemedicine program. This is real time with the provider at one monitor and the patient and a nurse at the other. The nurse is the one doing the hands on exam with the provider watching. The nurse is NOT certified but the provider would be.

Is anyone aware if this is permissible or if there are any references regarding this proposed evaluation?

Thanks,

Jane

Jane Stark, MD, MPH
Occupational Medicine
Marshfield Clinic
2116 Craig Road
Eau Claire, WI 54701

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Subject: Re: CDME through telemedicine
From: Natalie Hartenbaum <natah@comcast.net>
Date: Wed, 8 Jul 2015 14:34:04 -0400
X-Message-Number: 4

FMCSA had explored this a while back and at the time, determined that it would NOT be acceptable. I will attempt to see if there has been any further discussion.

I suspicion is that the person doing the HANDS-ON exam would be required to be the one certified. No different that the physician who is certified, having a non-certified NP or PA doing the examination but using his/her NRCME number.

Natalie P. Hartenbaum, MD, MPH, FACOEM
President and Chief Medical Officer
OccuMedix
PO Box 197
Dresher, PA 19025
215-646-2205
occumedix@comcast.net

> On Jul 8, 2015, at 2:28 PM, Stark, Jane MD MPH <stark.jane@marshfieldclinic.org> wrote:

>

> <[image001.jpg](#)>

> We are noticing an increase in drivers coming from a distance for their exams. We are exploring the possibility of providing these evaluations through our telemedicine program. This is real time with the provider at one monitor and the patient and a nurse at the other. The nurse is the one doing the hands on exam with the provider watching. The nurse is NOT certified but the provider would be.

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Subject: Re: CDME through telemedicine
From: Natalie Hartenbaum <natah@comcast.net>
Date: Wed, 8 Jul 2015 16:51:47 -0400
X-Message-Number: 5

I checked with Charles Horan, Director, Office of Carrier, Driver, and Vehicle Safety Standards, and it appears there had been some misunderstanding on the use of telemedicine for commercial driver medical certification examinations.

The official policy from FMCSA is that "telemedicine is not prohibited by the statute or the rule." The examination must be conducted by a Medical Examiner who is on the NRCME at the other end of the monitor but the person with the driver is not required to be on the registry if consistent with state law. the individual at the end with the driver would be assisting the examiner who would be "telepresent" at the other end. The examiner would be the one responsible with their name on the medical certificate. (My comment: Remember, this must be consistent with any state laws - potentially at both ends)

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occumedix@comcast.net

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> Jane

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> Jane Stark, MD, MPH

> Occupational Medicine

> Marshfield Clinic

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> Eau Claire, WI 54701

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Subject: Re: CDME through telemedicine
From: Natalie Hartenbaum <natah@comcast.net>
Date: Wed, 8 Jul 2015 17:42:03 -0400
X-Message-Number: 6

I have had lots of individual responses on this. If anyone would care to share, I can include comments in the next issue of CDME Review when I will include the telemedicine information. Please let me know if

I can use your name or if you would prefer to be anonymous. Depending on the responses, comments could be submitted to FMCSA.

Natalie P. Hartenbaum, MD, MPH, FACOEM
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occumedix@comcast.net

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> Natalie P. Hartenbaum, MD, MPH, FACOEM
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 Subject: FW: Feds Find Gaping Holes in Cal/OSHA Safety Net
 From: Garrett Brown <garrettdbrown@comcast.net>
 Date: Wed, 08 Jul 2015 15:24:37 -0700
 X-Message-Number: 7

Dear Colleagues: In case you did not see the June 26th Fed OSHA letter confirming the CASPA filed by the PEER organization in February 2014 regarding understaffing at Cal/OSHA and its adverse impact on protecting workers' health and safety in California.

I imagine that the response from Cal/OSHA and the Department of Industrial Relations is that this is all old news, and that the DIR Budget Change Proposal that went into effect on July 1st with the new state budget for

fiscal year 2015/16 ♦ will ♦ resolve the issue.♦

Not so fast ♦ the BCP calls for adding a total of 26 field inspector positions over a two year period. An incremental increase at best between now and June 2017. It is not clear whether the currently recognized vacancies ♦ there were 21 in May ♦ will be filled in addition to these 26 positions, or subtracted from the 26.

There is also the question of how any new compliance officers will be used. Imbedded in the BCP language was a proposal to significantly raise the performance goals of the new field inspectors in a way that could result in ♦once-over-lightly♦ inspections to meet the increased goals, and the end of ♦health♦ inspections that require more time to conduct.

Also there was no increase in the BCP for the Mining & Tunneling unit, or for the Medical Unit, or for the Professional Training & Development unit which will be responsible for training these new hires.

All these issue would be interesting questions to ask Cal/OSHA♦s and DIR♦s leadership at the next Advisory Committee meeting in August.

If you are interested in copies of the Fed OSHA letter, an analysis of the BCP that was incorporated into the current budget; and a summary chart of Cal/OSHA♦s field enforcement staffing levels as of May 2015, please contact me at garrettdbrown@comcast.net .

Best to all,
Garrett Brown

From: Jeff Ruch <jruch@peer.org>
Date: Wednesday, July 1, 2015 at 6:03 AM
To: Garrett Brown <garrettdbrown@comcast.net>
Subject: FW: PRESS RELEASE: Feds Find Gaping Holes in Cal/OSHA Safety Net

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For Immediate Release: Wednesday, July 1, 2015
Contact: Leola Webb (202) 265-7337

FEDS FIND GAPING HOLES IN CAL/OSHA SAFETY NET
Serious Enforcement and Inspection Failures Put California Workers at Risk

Washington, DC ♦ The, U.S. Occupational Safety & Health Administration (OSHA) has cited the worker health and safety program in California for falling below minimum performance standards in response to a complaint filed by Public Employees for Environmental Responsibility (PEER). As a result, the state Division of Occupational Safety & Health (Cal/OSHA) must upgrade its enforcement and inspection programs or face federal sanctions.

In a letter to PEER dated June 26, 2015, OSHA Area Director David Shiraishi upheld the bulk of the ♦Complaint about State Program Administration♦ that PEER filed in February 2014. In its review, OSHA found that Cal/OSHA:
* Fails to conduct an adequate number of inspections in dangerous workplaces and fails to follow its own policy of doing follow-up inspections on serious violators;
* Does not issue citations in a timely manner, thus delaying hazard abatement and prolonging dangerous conditions. OSHA found the ♦amount of time Cal/OSHA takes to issue citations is 69% longer than OSHA for safety inspections and 33% longer for health inspections♦; and
* Takes too long to respond to worker complaints of unsafe or unhealthy conditions. Cal/OSHA ♦averaged almost working four days to initiate investigations for complaints alleging serious hazards♦ with one serious complaint sitting 106 days. For non-serious complaints, Cal/OSHA averaged more than two weeks before inspecting with one case sitting 300 days. The OSHA letter contains recommendations for how Cal/OSHA can remedy the identified failures while concluding that ♦the State Plan is required to remedy these deficiencies.♦ Like California, nearly half the states are

funded by OSHA to operate their own state plans which, by law, must be at least as effective as the federal program. This finding means that California is not meeting that minimum threshold.

◆California workers are more at risk than those in other states and have less protection on the job now than at any other time in a generation,◆ stated PEER Executive Director Jeff Ruch, noting that California has more game wardens than workplace inspectors. ◆This is a failing grade that Cal/OSHA cannot ignore if it wants to keeps its doors open.◆

Under Governor Brown, Cal/OSHA has suffered from a leadership revolving door and a siphoning off of funding for other programs. The last OSHA annual audit in 2014 confirmed that Cal/OSHA ◆remains understaffed and, as a result, is challenged to fulfill its important mission.◆

The only PEER charge that OSHA did not sustain was that OSHA failed to conduct an adequate number of health inspections. OSHA found that while the number of Cal/OSHA health inspections actually decreased, the ratio of health versus safety inspections increased.

◆In California, environmental protection stops at the factory door,◆ added Ruch. ◆The Golden State often justifiably prides itself for being a national trendsetter but in terms of worker health and safety California is leading a race to the bottom.◆

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Read the OSHA findings

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